

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>Dr</i>	<i>32</i>	<i>1/29</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>PH/Am</i>	<i>1030 / 657</i>	<i>2/16/01 / 5/4/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 +/- Restricted O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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